PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No.					
First Inventor		HAMRICK			
Title	EXIT SIGN ILLUMINATED BY SELECTIVE COLOR LEDS				

Attorney Docket No.					
First Inventor		HAMRICK			
Title	EXIT SIGN ILLUMINATED BY SELECTIVE COLOR LEDS				
Expres	ss Mail Label No	D. ER 143994151 HS			

(Only for new nonprovisional applications under 37 CFR 1.53(b))			ss Mail Label No.	ER 1439	94151 U	s)	
APPLICATION ELEMENTS			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application				
See MPEP chapter 600 concerning utility patent application contents.						2	
Fee Transmittal I (Submit on original and 1. 2.	7. 8. 8. 8. 8. 8. 8. 8. 8. 8. 8. 8. 8. 8.	Washington, DC 20231 Q					
17. Other: Early Publication 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.							
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS							
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below							
Name	DOUGLAS HAMRICK						
	7652 EAGLE DRIVE						
Address							
City	PICKERINGTON	State	OHIO	Zip C	ode 431	47	
Country	USA	Telephone	(614) 296-55	91 Fa	x		
Name (Print/Type)	DOUGLAS HAMRICK	Re	egistration No. (Attor	rney/Agent)		<u> </u>	
Signature	D 12 - 1			Date	01-23-	-2004	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) \$32.00

Co	mplete if Known
Application Number	
Filing Date	01-23-2004
First Named Inventor	HAMRICK
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to: Deposit	Large Small				
Account Number	Entity Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	- D-1-1			
Deposit	Code (\$) Code (\$)	e Paid			
Account Name	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to				
Check Credit card Money Other Other	Examiner action				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 400 216 200 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month				
101 740 201 370 Utility filing fee 370.00	118 1,440 218 720 Extension for reply within fourth month				
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month				
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal				
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal				
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing				
SUPTOTAL (4) (4) 270 00	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 370.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,280 241 640 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)				
Total Claims 38 -20** = 18 X 9.00 = 162.00	143 460 243 230 Design issue fee				
Claims -3 1 1	144 620 244 310 Plant issue fee	-			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner				
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))				
109 84 209 42 ** Reissue independent claims over original patent	149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination				
SUBTOTAL (2) (\$) 162.00	Other fee (specify) Request Early Publication 3:	00.00			
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)300.0)0			

SUBMITTED BY

Name (Print/Type)

DOUGLAS HAMRICK

Registration No. (Attorney/Agent)

Signature

Complete (if applicable)

Telephone
(614) 296-5591

Date

Date

Date

WARNING Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number.

Order the Paperwork Reduction Act of	i 1995, no persons are	required to re	spond to a collection of i	iniormauor	unless it displays a valid OMB control number.
			Application Num	ber	
TRANSMITTAL			Filing Date		01-23-2004
FORM			First Named Inve	entor	HAMRICK
(to be used for all corre	spondence after init	tial filing)	Group Art Unit		
			Examiner Name		
Total Number of Page	es in This Submissio	n	Attorney Docket N	lumber	
		ENCL	OSURES (c	heck a	ll that apply)
Fee Transmittal Form Fee Attached Amendment / Reply After Final		(for an A	ent Papers (pplication) (s) g-related Papers		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
	on(s)	I	n to Convert to a		Proprietary Information
Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53		Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks Status Letter Other Enclosure(s) (please identify below): Other Enclosure(s) (please identify below):			Other Enclosure(s) (please
	SIGNATURE	OF APPLI	CANT, ATTORNEY	r, or a	GENT
Firm DC Individual name	OUGLAS HAN	ARICK			
Signature					
Date 0/- 23 -			°4		
CERTIFICATE OF MAILING					
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:					
Typed or printed name DOUGLAS		MRICK_			
Signature	N 1/	-()		Doto	01-23-2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.